

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
11a(c)

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NAME OF COMMITTEE (in Full)

WOMEN'S ALLIANCE FOR ISRAEL

C00336576

A. Full Name, Mailing Address and ZIP Code

MIRIAM SHERMER
20649 CHAMBERS RD
BERWICK HILLS, CA 91364

Receipt For: Primary General
 Other (specify):

B. Full Name, Mailing Address and ZIP Code

FRAN SHERWOOD
1112 CASHMERE ST.
LOS ANGELES, CA 90049

Receipt For: Primary General
 Other (specify):

C. Full Name, Mailing Address and ZIP Code

VILRY SIMMS
10100 SANTA MONICA BLVD
950
LOS ANGELES, CA 90067

Receipt For: Primary General
 Other (specify):

D. Full Name, Mailing Address and ZIP Code

RITA SINCE
15925 HIGH KNOLL RD
ENCINO, CA 91436

Receipt For: Primary General
 Other (specify):

E. Full Name, Mailing Address and ZIP Code

RENA SOMONIC
9911 W. PRO BLVD #301
LOS ANGELES, CA 90035

Receipt For: Primary General
 Other (specify):

F. Full Name, Mailing Address and ZIP Code

PAMELA SMITH
344 COAT DE ORO RD
LOS ANGELES, CA 90077

Receipt For: Primary General
 Other (specify):

G. Full Name, Mailing Address and ZIP Code

BARBARA SOMMERS
723 N. FOOTHILL RD
BEVERLY HILLS, CA 90210

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Date (month,
day, year)Amount of Each
Receipt this PeriodAmount of Each
Receipt this Period

SUBTOTAL of Receipts This Page (optional)

2460

TOTAL This Period (last page this line number only)